

Submitter: Jerri Clark

On Behalf Of:

Committee: House Committee On Judiciary

Measure, Appointment or Topic: HB2467

My name is Jerri Clark. My son met criteria for involuntary treatment the moment he stepped off the roof of a hotel and fell to his death. His preventable death provides an example of why this legislation is critical to save lives and create more reasonable access to treatment.

Calvin did not believe he was sick because of anosognosia, a common symptom of a psychotic disorder. Refusing treatment was rational to him because of this, even when any reasonable person could see that he was dangerously unwell. He was temporarily treated at a state hospital as a criminal defendant, but that treatment was to make him fit for trial, not mentally well. Incarceration caused trauma and contributed to his suicidality.

Current Oregon law requires evidence of danger at such a high standard that it's not met until someone like my son is actually dying. This legislation lowers the standard only slightly, but enough to improve a person's chances for treatment before tragedy or criminal involvement.

In my work as a family advocate I know many Oregon families whose stories are similar. Tragedy has become normalized. One of my constituents is a young man with schizoaffective disorder who supports this legislation but, like most people this ill, is too fragile and confused about his condition to testify publicly. He told me that when his psychosis takes charge, his family knows him better than he knows himself. He's grateful that his parents have fought to have him hospitalized when necessary, even when he fought back and didn't want to go. He was a friend to my son and wishes an involuntary intervention had been possible to save his friend's life too.

Harm is required—not prevented—by Oregon's current laws. Please pass this legislation to make access to treatment more reasonable and prevent avoidable crises and deaths in families like mine.